Filli	in this ir	formation to i	dentify your case:						
Deb	tor 1	Aniki	Shani	Coates					
Deb	101 1	First Name	Middle Name	Last Name	_	<del>_</del>			
	tor 2				.		s an amended		
(Spou	se, if filing)	First Name	Middle Name	Last Name		plan, and list	below the e plan that have		
Unit	ed States	Bankruptcy Court	for the : NORTHERN DISTRIC	CT OF ILLINOIS		been change	· ·		
	e Number								
(II KI	iowii)								
Offic	cial F	orm 113							
		er 13 F	Plan						
<u> </u>		<del>, , , , , , , , , , , , , , , , , , , </del>	1411				12/17		
Part	1: N	otices							
To De	btors:	does not ind	ts out options that may be icate that the option is app s that do not comply with l	propriate in your circumsta	nces or that it is permis	sible in your judi			
		In the followir	ng notice to creditors, you mu	ıst check each box that appli	ies.				
To Cr	editors:	Your rights may be affected by this plan. Your claim may be reduced, modified, or eliminated.							
			You should read this plan carefully and discuss it with your attorney if you have one in this bankruptcy case. If you do not have an attorney, you may wish to consult one.						
		confirmation a	the plan's treatment of your at least 7 days before the da ankruptcy Court may confirm tule 3015. In addition, you ma	te set for the hearing on con this plan without further noti	firmation, unless otherwise ce if no objection to confirm	e ordered by the E mation is filed. Se	Bankruptcy		
		plan include	matters may be of particular s each of the following iter III be ineffective if set out la	ns. If an item is checked as					
1.1	A limit	on the amount	of a secured claim, set ou	t in Section 3.2, which may	result in a	Included	Not Included		
1.2							Not Included		
1.3							Not Included		
Part	2: P	an Payment	s and Length of Plan						
2.1 De	ebtors(s	) will make reg	ular payments to the truste	ee as follows:					
	585.00	_	per <u>month</u> for <u>58</u> mon						
		tional lines if ne	ecessary.						
			f payments are specified, ad ecified in this plan.	ditional monthly payments w	ill be made to the extent n	ecessary to make	the		
อล	winents	to creditors spe	cinea in this blan.						

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Deb	tor 1	Aniki	Shani	Coates	Case Number (if known)				
		First Name	Middle Name	Last Name					
2.2	Reg	ular payments t	o the trustee will be made	from future income in	the following manner:				
	Che	ck all that apply.							
		Debtor(s) will m	ake payments pursuant to a	a payroll deduction order.					
Debtor(s) will make payments directly to the trustee.									
	Other (specify method of payment):								
2.3	Inco	me tax refunds							
	Chec	ck one.							
		Debtor(s) will re	tain any income tax refunds	received during the plan	term.				
					rn filed during the plan term within14 days of filing the return and will				
			trustee all income tax refun						
		tann over to the	tradico dil intonno tax rotani	ao robontoa aaning ino pi					
2.4	Add	itional payment	 S.						
		ck one.							
	_		in the dead the made of C.O.		an arranged and d				
		None. If "None"	is checked, the rest of § 2.4	need not be completed	or reproduced.				
2.5	The to	otal amount of e	estimated payments to the	e trustee provided for ir	n §§ 2.1 and 2.4 is \$				
Pa	art 3:	Treatmen	t of Secured Claims						
3.1 I	Maint	enance of payn	nents and cure of default,	if any.					
		ck one.	,	•					
	_		is checked, the rest of § 3.1	I need not be completed	or reproduced				
		NOTE: IL NOTE	is checked. The rest Of 9.5.1	meed noi de combletea (	DI TEDITUULGEU.				

3.2 Request for valuation of security, payment of fully secured claims, and modification of undersecured claims. Check one.

None. If "None" is checked, the rest of § 3.2 need not be completed or reproduced.

## The remainder of this paragraph will be effective only if the applicable box in Part1 of this plan is checked.

The debtor(s) request that the court determine the value of the secured claims listed below. For each non-governmental secured claim listed below, the debtor(s) state that the value of the secured claim should be as set out in the column headed Amount of secured claim. For secured claims of governmental units, unless otherwise ordered by the court, the value of a secured claim listed in a proof of claim filed in accordance with the Bankruptcy Rules controls over any contrary amount listed below. For each listed claim, the value of the secured claim will be paid in full with interest at the rate stated below.

The portion of any allowed claim that exceeds the amount of the secured claim will be treated as an unsecured claim under Part5 of this plan. If the amount of a creditor's secured claim is listed below as having no value, the creditor's allowed claim will be treated in its entirety as an unsecured claim under Part 5 of this plan. Unless otherwise ordered by the court, the amount of the creditor's total claim listed on the proof of claim controls over any contrary amounts listed in this paragraph.

The holder of any claim listed below as having value in the column headed Amount of secured claim will retain the lien on the property interest

of the debtor(s) or the estate(s) until the earlier of:

Name of Creditor	Estimate amount of credit		Collateral	Value of collateral	Amount of claims senior to	Amor secu claim		Interes t rate	payment to	Estimat total of mont	
Freedom Road Financial	\$	2,010.00	2016 Piaggio MP3 500 with over 6,000 miles	\$ 3,885.00	\$ 0.00	<u>\$</u>	2,010.00	10.50%	<u>\$ 100.00</u>	<u>\$</u>	2,251.38
Westlake Financial Svc	\$	8,874.00	2011 Nissan Quest with over 152,000 miles	\$ 6,950.00	\$ 0.00	\$	6,950.00	10.50%	<u>\$ 165.00</u>	<u>\$</u>	8,872.79

Deb	tor 1	Aniki	Shani	Coates	Case Nu	umber (if known)			
		First Name	Middle Name	Last Name					
3.3	Secu	red claims excluded fro	om 11 U.S.C. § 506.						
(		k one.							
	<b>—</b> 1	None. If "None" is chec	ked, the rest of § 3.3 n	eed not be comple	ted or reproduced.				
3.4		avoidance. eck one.							
		None. If "None" is che	ecked, the rest of § 3.4	need not be comp	leted or reproduced.				
3.5	Surr	ender of collateral.							
		eck one.							
Pa	None. If "None" is checked, the rest of § 3.5 need not be completed or reproduced.  Part 4: Treatment of Fees and Priority Claims								
4.1	Gen	eral							
	Trustee's fees and all allowed priority claims, including domestic support obligations other than those treated in § 4.5, will be paid in full without postpetition interest.								
4.2	Trus	stee's fees							
	Trustee's fees are governed by statute and may change during the course of the case but are estimated to be $\frac{7.10}{}$ % of plan payments; and during the plan term, they are estimated to total $\frac{2,409.03}{}$ .								
4.3	Atto	rney's fees							
	The	balance of the fees owe	d to the attorney for the	debtor(s) is estimate	ed to be \$4,500.00.				
4.4		rity claims other than a	attorney's fees and tho	se treated in § 4.5.					
		None. If "None" is check	ked, the rest of \$ 4.4 nee	ed not be completed	or reproduced.				
4.5	Don	nestic support obligation	ons assigned or owed	to a governmental	unit and paid less than f	ull amount.			
	Che	ck one.							
		None. If "None" is check	ked, the rest of § 4.5 nee	ed not be completed	or reproduced.				
Pa	art 5:	Treatment of No	onpriority Unsecure	d Claims					
5.1	Non	priority unsecured clai	ims not separately clas	ssified.					
		ved nonpriority unsecure			vill be paid, pro rata. If more	e than one option is check	ed, the option		
		The sum of \$							
		■							
		The funds remaining aft	ter disbursements have	been made to all oth	ner creditors provided for in	n this plan.			
5.2		Regardless of the option	ns checked above, paym	nents on allowed no	ority unsecured claims wo npriority unsecured claims secured claims. Check o	will be made in at least this			
0.2		None. If "None" is check	•	, ,					
		The debtor(s) will mainta on which the last payme	ain the contractual instalent is due after the final p	Iment payments and lan payment. These	d cure any default in paym e payments will be disburs	ed either by the trustee or	directly by the		
		debtor(s), as specified b	pelow. The claim for the	arrearage amount w	rill be paid in full as specific	ed below and disbursed by	the trustee.		
		Name of Creditor			Current installment payment	Amount of arrearage to be paid	Estimated total payments by trustee		

Debtor 1	Aniki	Shani	Coates		Case	Number <i>(if kı</i>	nown)		
	First Name  Mohela/Dept	Middle Name  of Ed	Last Name	Disburse Trus Deb		\$	0.00	\$	0.00
5.3 Oth	ner separately	classified nonpriority unsec	ured claims. Check	one.					
	None. If "Nor	ne" is checked, the rest of § 5.3	need not be comple	ted or reprodu	ced.				
Part 6	Execut	ory Contracts and Unexpi	red Leases						
6.1 The		ontracts and unexpired leases	s listed below are a	assumed and	will be treate	d as speci	fied. All other	executory	,
	None. If "Nor	ne" is checked, the rest of § 6.1	need not be comple	ted or reprodu	ced.				
Part 7	Vesting	g of Property of the Estate							
7.1 Pro	pperty of the e	estate will vest in the debtor(s	) upon						
	eck the applica	•	y upon						
	plan confirmate entry of discl	ation.							
Part 8	Nonsta	ndard Plan Provisions							
8.1 Che	eck "None" o	r List Nonstandard Plan Prov	isions						
	None. If "No	ne" is checked, the rest of Part	8 need not be comp	leted or reproc	luced.				
	ankruptcy Rul	e 3015(c), nonstandard provisio	ns must be set forth	below. A non	standard prov	rision is a p	rovision not oth	erwise incl	luded in
the Official F	Form or deviati	ing from it. Nonstandard provisi	ions set out elsewhe	ere in this plan	are ineffective	Э.			
	stee will be t ancial.	he disbursing agent for pr	e-confirmation a	dequate pro	otection pay	ments of	\$50.00 to Fr	<u>eedom R</u>	<u>load</u>
Trus	stee will he	the dishursing agent for	nre-confirmatio	n adequate	protection	navment	s of \$70.00	to West	lako

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Financial Svc.

Debtor 1	Aniki	Shani	Coates	Case Number (if known)				
	First Name	Middle Name	Last Name					
Part 9:	Signature(s):							
4. Signatures of Debtay(s) and Debtay(s). Attayney								

## 9.1 Signatures of Debtor(s) and Debtor(s)' Attorney

If the Debtor(s) do not have an attorney, the Debtor(s) must sign below; otherwise the Debtor(s) signatures are optional. The attorney for the Debtor(s), if

🗶 /s/ Aniki Shani Coates	
Aniki Shani Coates	
Date: 01/02/2024	-
★ /s/ Christine Michelle Kuhlman	Date: 01/03/2024
Signature of Attorney for Debtor	

By filing this document, the Debtor(s), if not represented by an attorney, or the Attorney for Debtor(s) also certify(ies) that the wording and order of the provisions in this Chapter 13 plan are identical to those contained in Official Form 113, other than any nonstandard provisions included in Part 8.

ebtor 1	Aniki	Shani	Coates	Case Number (if known)
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## **Exhibit: Total Amount of Estimated Trustee Payments**

The following are the estimated payments that the plan requires the trustee to disburse. If there is any difference between the amounts set out below and the actual plan terms, the plan terms control.

a.	Maintenance and cure payments on secured claims (Part 3, Section 3.1 total)	\$ 0.00
b.	Modified secured claims (Part 3, Section 3.2 total)	\$ 11,124.17
c.	Secured claims excluded from 11 U.S.C. § 506 (Part 3, Section 3.3 total)	\$ 0.00
d.	Judicial liens or security interests partially avoided (Part 3, Section 3.4 total)	\$ 0.00
e.	Fees and priority claims (Part 4 total)	\$ 6,909.03
f.	Nonpriority unsecured claims (Part 5, Section 5.1, highest stated amount)	\$ 15,534.00
g.	Maintenance and cure payments on unsecured claims (Part 5, Section 5.2 total)	\$ 0.00
h.	Separately classified unsecured claims (Part 5, Section 5.3 total)	\$ 0.00
i.	Trustee payments on executory contracts and unexpired leases (Part 6, Section 6.1 to	\$ 0.00
j.	Nonstandard payments (Part 8, total)	\$ 0.00
	Total of lines a through j	\$ 33,567.20

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